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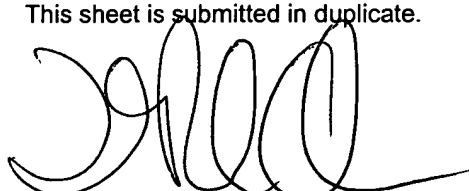
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	09/692,720
TOTAL AMOUNT OF PAYMENT		Filing Date	October 20, 2000
(\$) 620.00		First Named Inventor	Shunichi SEKIGUCHI
		Examiner Name	N. T. Diep
		Art Unit	2613
		Attorney Docket No.	1163-0299P

METHOD OF PAYMENT (check all that apply)	
<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch & Birch, LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
2. EXCESS CLAIM FEES							
						Small Entity	
						Fee (\$)	Fee (\$)
Fee Description							
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
<u>9</u>		<u>- 26 =</u>	<u>x</u>	<u>=</u>	Fee (\$)		Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
<u>2</u>		<u>- 9 =</u>	<u>x</u>	<u>=</u>			
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
<u> </u>	<u>- 100 =</u>	<u> </u>	<u>/50</u>	<u>(round up to a whole number) x</u>	<u> </u>	<u>=</u>	<u> </u>
4. OTHER FEE(S)							
						Fees Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge) 1402 Filing a brief in support of an appeal						500.00	
1251 Extension for response within first month						120.00	

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	40,439
Name (Print/Type)	D. Richard Anderson	Telephone	(703) 205-8035
		Date	September 18, 2006



TRANSMITTAL OF APPEAL BRIEF			Docket No. 1163-0299P
In re Application of: Shunichi SEKIGUCHI et al.			
Application No. 09/692,720	Filing Date October 20, 2000	Examiner N. T. Diep	Group Art Unit 2613
Invention: VIDEO DECODING METHOD PERFORMING SELECTIVE ERROR CONCEALMENT AND RESYNCHRONIZATION			
<u>TO THE COMMISSIONER OF PATENTS:</u>			
Transmitted herewith is the Appeal Brief in this application, with respect to the Notice of Appeal filed: <u>June 19, 2006</u> .			
The fee for filing this Appeal Brief is <u>\$ 500.00</u> .			
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity			
<input checked="" type="checkbox"/> A petition for extension of time is also enclosed.			
The fee for the extension of time is <u>\$ 120.00</u> .			
<input checked="" type="checkbox"/> A check in the amount of <u>\$ 620.00</u> is enclosed.			
<input type="checkbox"/> Charge the amount of the fee to Deposit Account No. <u>02-2448</u> . This sheet is submitted in duplicate.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any additional fees that may be required or credit any overpayment to Deposit Account No. <u>02-2448</u> . This sheet is submitted in duplicate.			
		Dated: <u>September 18, 2006</u>	
D. Richard Anderson Attorney Reg. No. : 40,439 BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8035			